

21-10-'04 16:43 從- WINSTON HSU, NO. 41526 8064986673

T-915 P14/47 U-080

USPTO 9/24/2004 6:04 AM PAGE 1/001 Fax Server
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26-09-'04 17:55 16- WINSTON HSU, NO. 41526 8064986673	T-583 P01733 U-730
<p style="text-align: center;">NORTH AMERICA INTERNATIONAL PATENT OFFICE P.O. BOX 506, MARSHALL, VA 22116, U.S.A. TEL: (703) 305-4938 FAX: (703) 305-4938 E-mail: winstonhsu@uspto.gov</p>	
<p>FAX TO: ART UNIT: 2673 Tel: (703) 305-4938 Fax: (703) 872-9306</p>	
<p>FROM: Winston Hsu, PATENT AGENT, REG. NO. : 41,526 SERIAL NO.: 10/664,357</p>	
<p>ATTORNEY DOCKET NO.: PMXP0142USA</p>	
<p>SUBJECT: INFORMATION DISCLOSURE STATEMENT & PRELIMINARY AMENDMENT</p>	
<p>TOTAL PAGES: 33 PAGES (INCLUDING COVER PAGE)</p>	
<p style="text-align: center;">Winston Hsu 2004/09/24</p>	
<p style="text-align: center;">PMXP0142USA0_A1_1 PMXP0142USA0_D1_3</p>	
<p style="font-size: small;">PAGE 14/47 * RCVD AT 09/24/2004 6:04 AM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/0 * DNIS:8729306 * CSID:8064986673 * DURATION (mm:ss):11:56</p>	

**NORTH AMERICA
INTERNATIONAL PATENT OFFICE**

P.O. BOX 506, Merrifield, VA 22116, U.S.A.
TEL:+886-2-8923-7350 FAX:+886-2-2929-5950 e-mail:winstonhsu@naipo.com.tw

FAX TO: ART UNIT: 2673

Tel: (703) 305-4938

Fax: (703) 872-9306

FROM: Winston Hsu, PATENT AGENT, REG. NO. : 41,526

SERIAL NO.: 10/064,357

ATTORNEY DOCKET NO.: PMXP0142USA

**SUBJECT: INFORMATION DISCLOSURE STATEMENT
& PRELIMINARY AMENDMENT**

TOTAL PAGES: 33 PAGES (INCLUDING COVER PAGE)

Winston Hsu 2004/09/24

**PMXP0142USA0_A3_1
PMXP0142USA0_D1_3**

PTO/SB/97 (08-03)

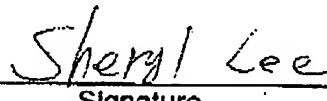
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APPLICATION NUMBER: 10/064,357

PAPERS INCLUDED:

(1) Transmittal Form	1 PAGE
(2) Fee Transmittal	1 PAGE
(3) Information Disclosure Statement	20 PAGES
(4) Preliminary Amendment	9 PAGES

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e-mail:winstonhsu@naipo.com

**FAX TO: Nelson, Alecia Diane Tel: (703) 305-0143
ART UNIT: 2675 Fax: (703) 872-9306**

FROM: Winston Hsu, PATENT AGENT, REG. NO.: 41,526

SERIAL NO.: 10/064,357

ATTORNEY DOCKET NO.: PMXP0142USA

**SUBJECT: Response to the Office action dated
10/01/2004**

TOTAL PAGES: 47 PAGES (INCLUDING COVER PAGE)

Winston Hsu 2004/10/21

PMXP0142USA0_A2_1

PTO/SB/07 (09-04)

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Celia Hsieh

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(1) Transmittal Form	1 PAGE
(2) Fee Transmittal	1 PAGE
(3) Response to Office Action	9 PAGES
(4) copy of Information disclosure statement and preliminary amendment submitted on 09/24/2004 and its Auto-reply facsimile Transmission	34 PAGES

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

45

Application Number	10/064,357
Filing Date	07/04/2002
First Named Inventor	Shih-Sheng Huang
Art Unit	2675
Examiner Name	Nelson, Alecia Diane
Attorney Docket Number	PMXP0142USA

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of Information Disclosure Statement and Preliminary Amendment submitted on 08/24/2004 and its Auto-Reply Facsimile Transmission
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	North America Intellectual Property Corporation		
Signature			
Printed name	Winston Hsu		
Date	10/20/2004	Reg. No.	41,526

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Signature		
Typed or printed name	Date	

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PTO/SB/17 (10-04)

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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\\$) 0.00**

Complete if Known

Application Number	10/064,357
Filing Date	07/04/2002
First Named Inventor	Shih-Sheng Huang
Examiner Name	Nelson, Alecia Diane
Art Unit	2675
Attorney Docket No.	PMXP0142USA

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number **50-3105**
Deposit Account Name **North America Intellectual Property Corp.**

The Director is authorized to: (check all that apply)

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FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 790	2001 395	Utility filing fee	
1002 350	2002 175	Design filing fee	
1003 550	2003 275	Plant filing fee	
1004 790	2004 395	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\\$) 0.00			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims	Extra Claims from below	Fee Paid	
Independent Claims	-20** = <input type="text"/> X <input type="text"/> = <input type="text"/>		
Multiple Dependent	-3** = <input type="text"/> X <input type="text"/> = <input type="text"/>		
Large Entity		Small Entity	
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 88	2201 44	Independent claims in excess of 3	
1203 300	2203 150	Multiple dependent claim, if not paid	
1204 88	2204 44	** Reissue Independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 end over original patent	
SUBTOTAL (2) (\\$) 0.00		Other fee (specify)	
** or number previously paid, if greater; For Reissues, see above		Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) (\\$) 0.00	

SUBMITTED BY

Name (Print/Type)	Winston Hsu	Registration No. (Attorney/Agent)	41,526	Telephone	888-2-89237350
Signature	<i>Winston Hsu</i>			Date	10/20/2004

(Complete if applicable)

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PTO/SB/21 (02-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

		Application Number	10/064,357
		Filing Date	07/04/2002
		First Named Inventor	Shih-Sheng Huang
		Art Unit	2673
		Examiner Name	
Total Number of Pages in This Submission	31	Attorney Docket Number	PMXP0142USA

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Remarks	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Winston Hsu, Reg. No.: 41,526
Signature	<i>Winston Hsu</i>
Date	9/24/2004

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	Date

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 0.00)

Complete if Known

Application Number	10/064,357
Filing Date	07/04/2002
First Named Inventor	Shih-Sheng Huang
Examiner Name	
Art Unit	2673
Attorney Docket No.	PMXP0142USA

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number 50-3105
 Deposit Account Name North America Intellectual Property Corp.

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FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 255	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$ 0.00)			

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

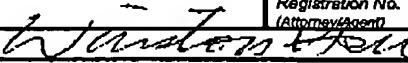
Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			-20** =	X	
			- 3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 88	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 88	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 0.00)		

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 185	Notice of Appeal	
1402 330	2402 185	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify)			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$ 0.00)	

(Complete if applicable)				
Name (Print/Type)	Winston Hsu	Registration No. (Attorney/Agent)	41,526	Telephone 886289237350
Signature		Date	10/04/2004	

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